

Electronic Data Interchange (EDI)

PRISM frequently asked questions for providers

How do I view the Trading Partner Numbers (TPN) that I use to send claims to Utah Medicaid (837: P, D, I), eligibility inquiries (270), claim inquiries (276), and prior authorizations request/inquiries (278) and receive my Electronic/Paper RA (835)?

A Trading Partner Number (TPN) is the address by which a provider is known to the Utah Health Information Network (UHIN) and to Utah Medicaid. A TPN is formatted as follows: HTxxxxxx-xxx.

For example HT000004-001 is a TPN owned by Utah Medicaid. Fee for service providers send their HIPAA transaction from their billing agent/clearinghouses TPN to the Utah Medicaid TPN when submitting 837s (claim transactions) through the UHIN network. All billing agents/clearinghouses sending electronic HIPAA transactions through UHIN to Utah Medicaid must have an assigned TPN.

To have an assigned TPN, the billing agent, clearinghouse, or provider must contact UHIN.

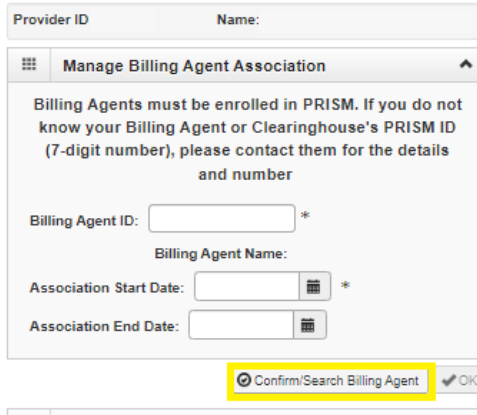
Providers must also contact their billing agent/clearinghouse to identify what TPN(s) is assigned from UHIN for each transaction the provider has contracted to send to Utah Medicaid through the UHIN network. This is the information required to fill out the **Mode of Claim Submission** and the **Associate Billing Agent** step in the Business Process Wizard (BPW).

Providers may have and use multiple TPN's per HIPAA transaction at any given time. It is best practice to end-date TPNs no longer in use. The Electronic Remittance transaction known as the 835 may only have one active billing agent/clearinghouse at any one time period due to the fact that only one 835 may be created for each weekly adjudication.

How do I add or modify a billing agent/clearinghouse?

In the Business Process Wizard (BPW), choose the **Mode of Claim Submission/EDI Exchange** step.

Click on the **Confirm/Search Billing Agent** button.



Provider ID: _____ Name: _____

Manage Billing Agent Association

Billing Agents must be enrolled in PRISM. If you do not know your Billing Agent or Clearinghouse's PRISM ID (7-digit number), please contact them for the details and number

Billing Agent ID: *

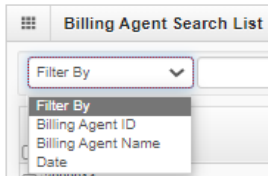
Billing Agent Name:

Association Start Date: *

Association End Date:

Confirm/Search Billing Agent OK

The billing agent/clearinghouse List will contain *some* **Billing Agents** who have chosen to independently enroll, as well as Utah Health Information Network (UHIN).



Billing Agent Search List

Filter By

Filter By

- Billing Agent ID
- Billing Agent Name
- Date

Choose a filter to search for your billing agent/clearinghouse such as **Billing Agent ID** which your billing agent/clearinghouse may have provided to you along with the Trading Partner number(s) (TPN) required to complete the step processes.

Click on the **Go** button then choose the appropriate billing agent/clearinghouse by checking the box to the left of the Billing Agent Search List. Now press **Select** to move to the next step.



Billing Agent Search List

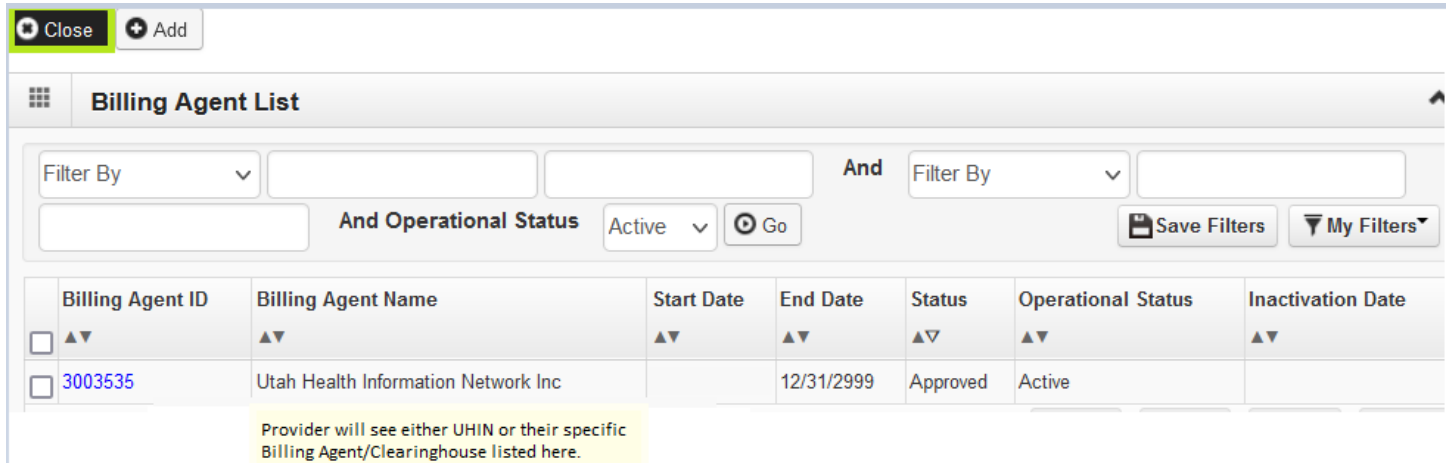
Filter By **Go** **Save Filters** **My Filters**

	Billing Agent ID	Billing Agent Name	Start Date	End Date
<input type="checkbox"/>	3000014	Billing Agent Name	07/01/2016	12/31/2999

Select **Close**

Now you will see the billing agent/clearinghouse chosen to support the HIPAA transactions through the UHIN network. Click **Close**. The TPNs will be added in the

next BPW step called **Associate Billing Agent**. Look at the following question below, for help with adding TPNs.



Billing Agent List

Filter By And Filter By
 And Operational Status Active

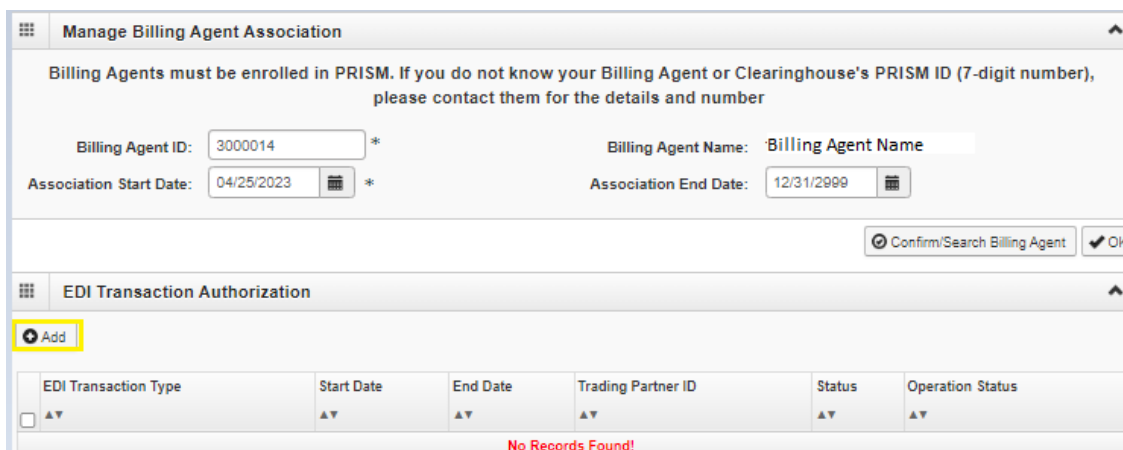
	Billing Agent ID	Billing Agent Name	Start Date	End Date	Status	Operational Status	Inactivation Date
<input type="checkbox"/>	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼
<input type="checkbox"/>	3003535	Utah Health Information Network Inc		12/31/2999	Approved	Active	

Provider will see either UHIN or their specific Billing Agent/Clearinghouse listed here.

How do I add a Trading Partner Number (TPN) after adding a Mode of Claim Submission?

Using the Business Process Wizard (BPW), click on the **Associate Billing Agent** step.

Now the **Add** button is active. Click on **(+) Add** button to associate the HIPAA transactions to be exchanged with the chosen billing agent/clearinghouse or with the Electronic Batch Mode of Submission.



Manage Billing Agent Association

Billing Agents must be enrolled in PRISM. If you do not know your Billing Agent or Clearinghouse's PRISM ID (7-digit number), please contact them for the details and number

Billing Agent ID: * Billing Agent Name:
 Association Start Date: * Association End Date:

EDI Transaction Authorization

	EDI Transaction Type	Start Date	End Date	Trading Partner ID	Status	Operation Status
<input type="checkbox"/>	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼

No Records Found!

Each HIPAA transaction must be added with the specific Trading Partner Number (TPN) that the provider will be exchanging with Utah Medicaid. Best practice is to use the current date as the "state date" when creating new Trading Partner entries.

Associate Trading Partner ID

Provider Trading Partner ID for the Transactions:

Electronic Transaction Type: *

Trading Partner ID:

Start Date:

End Date:

270/271-Eligibility Inquiry/Response
276/277-Claim Status Inquire/Response
278/278-Prior Authorization Request/Response
835-Health Care Claim Payment/Advice
837D-Dental(FFS)
837I-Institutional(FFS)
837P-Professional(FFS)

To add Electronic Transaction Type(s) with the current clearinghouse, click the **(+) Add** button just below **EDI Transaction Authorization**. Once all transactions have been added, click on the **Approve** button.

EDI Transaction Authorization

Filter By And Filter By

And Operational Status

EDI Transaction Type	Start Date	End Date	Trading Partner ID	Status	Opera
<input type="checkbox"/> <input type="button" value="▲▼"/>	<input type="button" value="▲▼"/>	<input type="button" value="▲▼"/>	<input type="button" value="▲▼"/>	<input type="button" value="▲▼"/>	<input type="button" value="▲▼"/>
<input type="checkbox"/> 837P-Professional(FFS)	03/06/2023	12/31/2999	HT001234-001	Approved	Active
<input type="checkbox"/> 835-Health Care Claim Payment/Advice	04/25/2023	12/31/2999	HT001234-001	In Review	Active
<input type="checkbox"/> 270/271-Eligibility Inquiry/Response	04/25/2023	12/31/2999	HT001234-001	In Review	Active

The addition of TPNs is the same for both the electronic batch and billing agent/clearinghouse/UHIN.

If a known billing agent/clearinghouse is not found in the Billing Agent ID listing **and** the provider has the TPN from the billing agent/clearinghouse, the provider must choose the **Billing Agent/Clearinghouse/UHIN** option and input the TPN given to them by their billing agent/clearinghouse representative.

If Direct Data Entry (DDE) is needed to submit claims to Utah Medicaid, check the box to the far left of the Direct Data Entry listing.

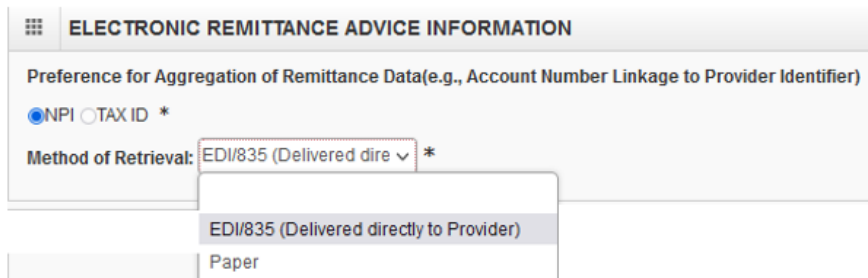
Other Claims Submission

Method	Description
<input checked="" type="checkbox"/> Direct Data Entry(DDE)	To Submit FFS claims via online screens

Once all modes have been selected and all TPN's have been added, click on the **Save** button.

How do I choose what type of remittance advice I receive from Utah Medicaid?

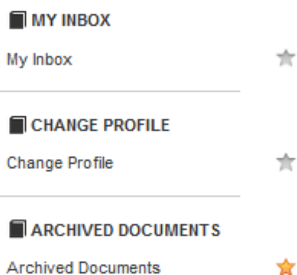
In the Business Process Wizard (BPW), go to the step named **835/ERA Enrollment** form. Scroll down to the heading **Electronic Remittance Advice Information**. Click on the **Method of Retrieval**. Two options will appear: **EDI/835 (delivered directly to the provider)** and **Paper**.



Click one time on the preferred method of delivery and then return to the top of the page to click on the **Submit** button.


How do Providers view their Remittance Advice (835/Paper RA)?

Billing providers may choose how they receive their remittances. Providers may choose to receive them by Trading Partner Number (TPN) or paper that is delivered in a PDF file located in their **My InBox** found in the Archived Documents folder



Billing providers may choose to receive their remittances either by post office mail or by Electronic 835 Remittance. The paper remittance will be converted to a PDF only format after May 25, 2023.

This setting is found on the **Business Process Wizard (BPW) 835/ERA Enrollment Form** step.


ELECTRONIC REMITTANCE ADVISE INFORMATION

Preference for Aggregation of Remittance Data(e.g., Account Number Linkage to Provider Identifier)

☒ NPI ☐ TAX ID *

Method of Retrieval: EDI/835 (Delivered dire ▼ *

EDI/835 (Delivered directly to Provider)
 Paper

*The preference for aggregation may only be NPI due to system restrictions.



Why hasn't my modification been approved/reviewed/updated by Utah Medicaid?


Always ensure that the modification is submitted by going to the last step in the Business Process Wizard (BPW) after making all modifications needed. All modified statuses will show as "Updated".

Below is an example where the submit button has not been pressed to complete the process.

: Submit Modification Request for Review	Required	04/04/2023	01/12/2023	Incomplete		Modification Request has not been Submitted.
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To submit, click the blue hyperlink called **Submit Modification Request for Review** and this screen will appear:

 Close
  Next


Final Submission

NPI: NPI or Provider ID

EnrollmentType: Group Practice (Corporation, Partnership, LLC, etc.)

The Information submitted shall be verified and reviewed by the State.
During this time, any changes to the information shall not be accepted.

I agree that the information submitted as a part of the application is correct. (Private and Confidential)

To complete your submission, click on the **>Next** button in the upper left. Attest to the modifications that have been submitted by checking the box for the Provider Enrollment Terms and Conditions with an authorized signature/name and date.


NPI: 1801857511 Name: IVR TEST

Provider Enrollment Terms and Conditions

With my signature below, I acknowledge and certify to all of the following:

- a. I have carefully read and understand the contents of this application. I am the authorized representative of the Provider or Billing Agent and, as such, have the authority to enter into a provider agreement with the Medicaid program on the Provider or Billing Agent's behalf.
- b. The information provided in this application is correct and complete. I authorize Medicaid or its agent to verify this information. I understand that Medicaid may determine that the information I have submitted does not meet the Medicaid program enrollment requirements and that the Provider or Billing Agent may no longer be eligible to participate in the Utah Medicaid program.
- c. I understand it is my responsibility to ensure that all information is continuously updated in the PRISM Provider Portal. I understand that failure to maintain current and correct information may result in payments being delayed or closure of this Medicaid Provider or Billing Agent. I agree to notify Medicaid and/or modify the provider record in PRISM of any changes to the information within five (5) business days of the effective date of the change.
- d. I understand that any omission, misrepresentation, or falsification of any information in connection with this application for enrollment may be subject to criminal, civil, or administrative sanctions including, but not limited to, the denial of participation in the Medicaid program.
- e. I hereby agree to comply with all applicable laws, rules, and written policies pertaining to the Medicaid program, including but not limited to, Title XIX of the Social Security Act, the Code of Federal Regulations, Utah Codes, Utah Administrative Code, Utah Provider Manuals, and other official bulletins and publications of the Medicaid program.

☐ By checking this, I certify that I have read and that I agree and accept the Provider Enrollment Terms and Conditions.

Authorized Signature: * Date: 

Now click on the **Submit for Modification** button. The modification is now complete and returned to Utah Medicaid for processing.

How do I view my Electronic Remittances (835)?

Most providers will access their electronic remittance advice (835) from a portal supplied by their clearinghouse/billing agent. If a provider needs a duplicate copy of their 835, providers may view and download their electronic remittance advice (835) by logging into PRISM with a profile that has access to the 835 link found in the RA list page as shown below. These include the following:

- Claims submitter – provider
- Claims inquiry – provider
- Claims processor – provider

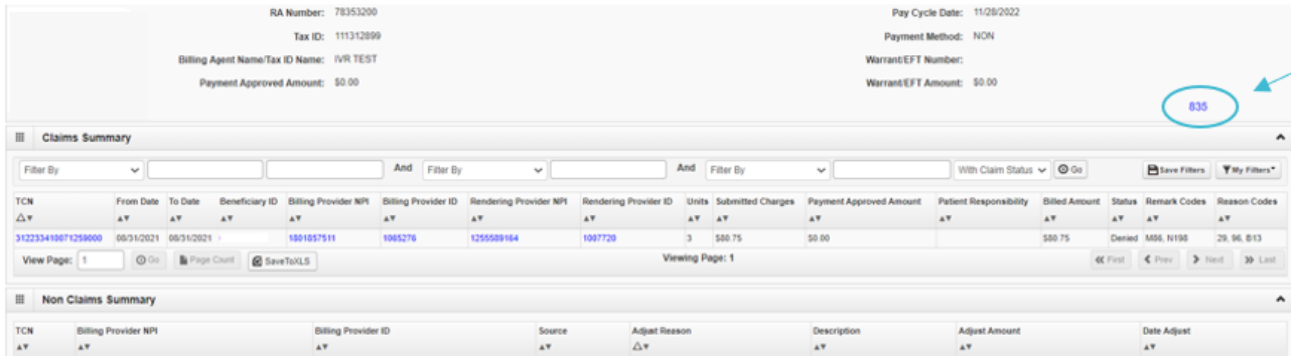
The provider/billing agent must have enrolled a Trading Partner Number (TPN) in PRISM to each billing provider account they manage.

One TPN may only be active at any time for the 835 transactions. TPN numbers may also be referred to as HT numbers because the TPN is formatted like this:

HTxxxxxx-xxx.

Capital H, Capital T, followed by six (6) numbers, dash, ending with three numbers.

Utah Medicaid does not recognize other clearinghouse/billing agent payer IDs. To verify what TPN number is used, a provider must contact their billing agent/clearinghouse for this information.



RA Number: 78353200
Tax ID: 111312899
Billing Agent Name/Tax ID Name: IVR TEST
Payment Approved Amount: \$0.00
Pay Cycle Date: 11/28/2022
Payment Method: NON
Warrant/EFT Number:
Warrant/EFT Amount: \$0.00

Claims Summary

TCN	From Date	To Date	Beneficiary ID	Billing Provider NPI	Billing Provider ID	Rendering Provider NPI	Rendering Provider ID	Units	Submitted Charges	Payment Approved Amount	Patient Responsibility	Billed Amount	Status	Remark Codes	Reason Codes
312233410071258000	08/31/2021	09/31/2021		1001057511	1005276	1255588164	1007720	3	\$80.75	\$0.00		\$80.75	Denied	M06, N195	29, 96, B13

View Page: 1 | Page Count: 1 | Save To XLS | Viewing Page: 1

Non Claims Summary

TCN	Billing Provider NPI	Billing Provider ID	Source	Adjust Reason	Description	Adjust Amount	Date Adjust

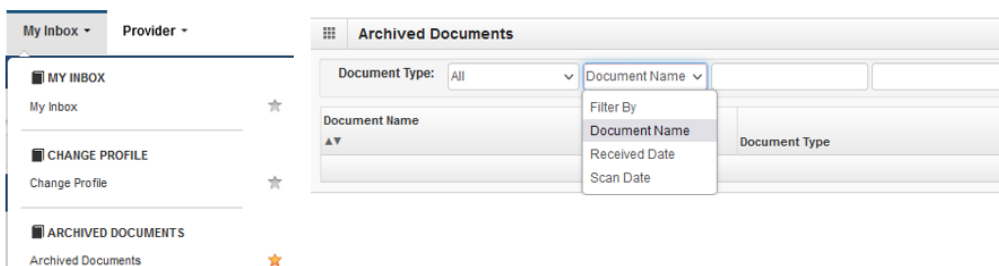
Providers may download a copy of the x12 file if their clearinghouse was not able to provide the 835 directly for any reason by clicking on the 835 link on the upper right of the RA List page. Providers must have a text editor and understand how to read x12 to view this information.

How do I view my paper RA (remittances)?

Providers may view paper RA (paper remittance advice) by logging into PRISM. Providers must log in with a profile that has access to the Archived Documents area in PRISM. Those include the following:

- Claims submitter – provider
- Claims inquiry – provider
- Claims processor – provider
- EDI analyst

Once logged into the correct profile, providers will open their **My Inbox** link to click on the **Archived Documents** link which opens a search to put in the search criteria to find the specific remittance they want to review.



My Inbox | **Provider**

MY INBOX

- My Inbox
- CHANGE PROFILE
- ARCHIVED DOCUMENTS

Archived Documents

Document Type: All | Document Name

Document Name

Filter By

- Document Name
- Received Date
- Scan Date

Document Type

Providers may search by document name, receive date, or scan date.

Archived Documents			
Document Type:	All	Received Date	01/20/2023 03/28/2023 Filter By
Document Name	Document Type	Scanned Date	
Paper RA	Claim Documents	02/13/2023 07:46:00	

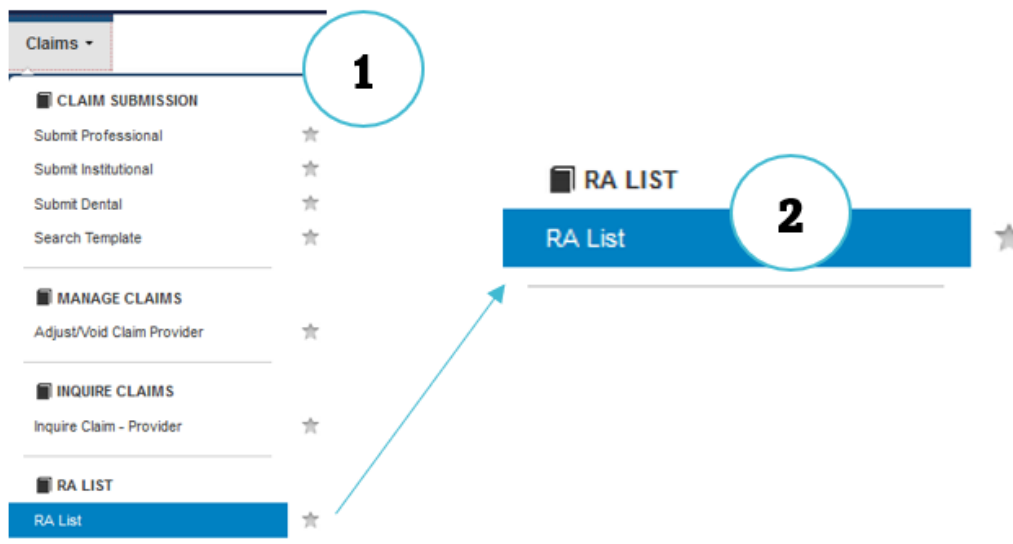
Once located, providers can click on the blue hyperlink **Paper RA** to open the pdf in their default viewer.

How to View claims grouped by Remittance Advice Number (Adjudication Cycle) in four easy steps?

Providers must log in with a profile that has access to the Claims View:

- Claims submitter – provider
- Claims inquiry – provider
- Claims processor – provider

Once logged in, providers may click **Claims** (1) at the top navigation bar. Then find and click **RA List** (2) to search for a specific remittance number, a specific date, and so on based on the search field criteria.



(3) Input remittance advice criteria, then click on the **GO** button shown below.

Payment Summary

Pay Cycle Date: 01/01/2023 03/30/2023 And Filter By: **GO**

RA Number ▲▼	Warrant/EFT Number ▲▼	Pay Cycle Date ▲▼	Transaction Count ▲▼	Amount ▲▼
78353758		01/23/2023	2	\$114.90

View Page: 1 **GO** Page Count SaveToXLS Viewing Page: 1

Once a remittance is found, the provider may click on the blue hyperlink, such as 78353758 shown above.

4

RA Number: 78353290 Pay Cycle Date: 11/26/2022
 Tax ID: 111312899 Payment Method: NON
 Billing Agent Name/Tax ID Name: IVR TEST Warrant/EFT Number:
 Payment Approved Amount: \$0.00 Warrant/EFT Amount: \$0.00

835

Claims Summary

Filter By: And Filter By: And Filter By: With Claim Status: **GO** Save Filters My Filters*

TCN ▲▼	From Date ▲▼	To Date ▲▼	Beneficiary ID ▲▼	Billing Provider NPI ▲▼	Billing Provider ID ▲▼	Rendering Provider NPI ▲▼	Rendering Provider ID ▲▼	Units ▲▼	Submitted Charges ▲▼	Payment Approved Amount ▲▼	Patient Responsibility ▲▼	Billed Amount ▲▼	Status ▲▼	Remark Codes ▲▼	Reason Codes ▲▼
312233410071259000	05/31/2021	05/31/2021		1001057511	1005276	1255509164	1007720	3	\$50.75	\$0.00		\$50.75	Denied	M06, N195	29, 96, B13

View Page: 1 **GO** Page Count SaveToXLS Viewing Page: 1

Non Claims Summary

TCN ▲▼	Billing Provider NPI ▲▼	Billing Provider ID ▲▼	Source ▲▼	Adjust Reason ▲▼	Description ▲▼	Adjust Amount ▲▼	Date Adjust ▲▼
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(4) Providers will now see a listing for all adjudicated claims associated with the remittance advice at the top and with any gross payments found under the Non Claims Summary window.